

4

NON-PROVISIONAL UTILITY PATENT APPLICATION TRANSMITTAL - 37 CFR 1.53(b)

[] Duplicate (check, if applicable)

Assistant Commissioner for Patents **BOX PATENT APPLICATION** Washington, DC 20231

Attorney Docket No. 048626-5003-05

First Named Inventor: Redei

Express Mail No.: EL71936577515

Total Pages of Transmittal Form: 2

Transmitted herewith for filing is the non-provisional utility patent application entitled:

	ANTI	DEPRESSANT EFFECTS OF CORTICOTROPIN RELEASE INHIBITING FACTOR						
wh	ich is:							
an	[] Orig	ginal; or						
a	[] Continuation, [X] Divisional, or [] Continuation-in-part (CIP)							
	of prior Application No. 09/366,981 filed August 4, 1999.							
1.	Anticipated Group/Art Unit: or Class, Subclass							
This non-provisional patent application is based on Provisional Patent Application No. 60/140,								
Ð		June 24, 1999.						
🖫 Enc	closed are	:						
ŧ	[X]	Specification (including Abstract) and claims: 30 pages.						
4	[]	Application Data Sheet.						
This non-provisional patent application is based on Provisional Patent Application No. 60/140,96 June 24, 1999. Enclosed are: [X] Specification (including Abstract) and claims: 30 pages. [] Application Data Sheet. [] Newly executed/unexecuted Declaration (original/copy).								
Z Žaš	[X] Copy of Declaration from prior application.							
	[]	Separate Power of Attorney (including 37 CFR 3.73(b) statement, if applicable).						
How the face that the state of	[5]	sheets of drawings (formal) plus one copy.						
	[]	Microfiche computer program (Appendix).						
rat cii	[X]	[X] Nucleotide and/or Amino Acid Sequence Submission, including:						
	[] Computer readable copy [X] Paper Copy [] Verified Statement.							
		Please transfer the diskette version of the Sequence Listing from the parent application						
	to th	e present application.						
	[]	[] Under PTO-1595 Cover Sheet, an assignment of the invention						
	[X]							
	[]	Certified copy(ies) of Application No(s) filed is/are filed:						
		[] herewith or [] in prior application &@.						
	[X]	Applicant(s), by its/their undersigned attorney, claim(s) Small Entity Status under 37 C.F.R.						
		§1.27 as [] an Independent Inventor, or [] a Small Business Concern, or [X] a Non-Profit						
		Organization.						
	[X]	Preliminary Amendment.						
	[X] Information Disclosure Statement and PTO-1449. Copies of the references cited at included as they have been filed in the parent application.							

[] Other: The filing fee is calculated as follows:

			SMALL	ENTITY		LARGE	ENTITY
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE: \$370			BASIC FEE: \$740	
Total	12-20 =	0	X9	\$	OR	X18	\$
Independen t	2-3=	0	X42	\$	OR	X84	\$
[] Multiple	Dependent Clai	ms Present	\$140	\$	OR	\$280	\$
			TOTAL	\$ 370.00	OR	TOTAL	\$

The Commissioner is not authorized to charge the filing fee at this time as we elect to defer
payment of the entire filing fee until receipt of a Notice to File Missing Parts.

[X] A check in the amount of \$370.00 to cover the filing fee is enclosed.

[X] The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-0310** (Billing No. 048626-5003) as noted below.

[X] Any overpayments or deficiencies in the above-calculated fee.

[] Filing fee in the amount of \$_____ as calculated above.

[X] Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.

[X] In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted

above.

CORRESPONDENCE ADDRESS:

(Date) By:

KATARYN DOYLE, Ph.D, J.D.

Registration No. 36,317

MORGAN, LEWIS & BOCKIUS, LLP

1701 Market Street

Philadelphia, PA 19103-2921 Telephone: (215) 963-5000 Direct Dial: (215) 963-4723 Facsimile: (215) 963-5299

E-Mail: kdoyle@morganlewis.com

Attorney for Applicants

[X] Customer Number or Bar Code Label: 028977

KD/kck Enclosures

EN EN CHEN THE WAY

į.i

Bears Small march